2017 – 2018
Gavilan College – Financial Aid Office
Parent Request for Professional Judgment

If your parent has experienced extenuating circumstances (financial, household size) in 2017, you may request a review of your information to determine if **professional judgment** is appropriate. Professional judgment is used by the Financial Aid Office only when the outcome results in a lower **Expected Family Contribution (EFC).** The EFC is used to award federal grants, work study and student loans.

You will be required to provide supporting documentation to verify your situation.

The Financial Aid Office will notify you as to the outcome of this request.

This is a 3-part process.

Part 1: To be Completed by Financial Aid Office

_____ _____
Student Name Gavilan ID

1. Would student benefit from professional judgment?

EFC must be greater than zero.

EFC=_____ on Transaction #_____

2. Student is required to submit the following verification documents:

___Dependent Verification Worksheet

___ Use IRS Data Retrieval **OR** Request Tax Transcript is required for Parents & Student

3. Documentation Requested of PARENTS for 2017:

_____ W2 Forms for 2017
_____ Last check stub with Year-to-Date earnings
_____ Letter of termination from your employer
_____ Unemployment benefits statement
_____ Notice of Action (TANF)
_____ Social Security benefits statement
_____ Workers Compensation statement
_____ Disability statement
_____ Divorce documents
_____ Death certificate
_____ Other_____
_____ Other_____

_____ _____
Staff Signature Date

_____ _____
Student Name Gavilan ID

Part 2: To be Completed by Parent

What income, household changes are you reporting for 2017?

_____

_____

_____

_____

_____

_____

Check the appropriate situation(s):

Date this became effective:

- ❑ Unemployment since _____/_____/_____
- ❑ Separation since _____/_____/_____
- ❑ Divorce since _____/_____/_____
- ❑ Death of spouse _____/_____/_____
- ❑ Other_____ _____/_____/_____

Mother's Income from January – December 2017:

Wages from Work

Year to date amount from most recent check stub or W-2?	Employer	Currently working w/this employer?	If yes, how many hrs are you working?
$_____	_____	_____	_____hrs per_____
$_____	_____	_____	_____hrs per_____
$_____	_____	_____	_____hrs per_____
$_____	_____	_____	_____hrs per_____

All other income & benefits

	Source	Currently receiving these benefits?	If benefits will stop/stopped list date benefits will stop(ped)
$_____every_____	_____	_____	_____
$_____every_____	_____	_____	_____
$_____every_____	_____	_____	_____
$_____every_____	_____	_____	_____

_____ _____
Student Name Gavilan ID

Part 2: To be Completed by Parent (continued)

Father's Income from January – December 2017:

Wages from Work

Year to date amount from most recent check stub or W-2?	Employer	Currently working w/this employer?	If yes, how many hrs are you working?
$_____	_____	_____	_____hrs per_____
$_____	_____	_____	_____hrs per_____
$_____	_____	_____	_____hrs per_____
$_____	_____	_____	_____hrs per_____

All other income & benefits

	Source	Currently receiving these benefits?	If benefits will stop/stopped list date benefits will stop(ped)
$_____every_____	_____	_____	_____
$_____every_____	_____	_____	_____
$_____every_____	_____	_____	_____
$_____every_____	_____	_____	_____

Part 3: Certification (Read carefully before you sign)

My signature below indicates:

- Information submitted on this form and attached documentation is true and correct.
- I understand if I purposely give false or misleading information:
  - The Financial Aid Office is required to correct any discrepancies.
  - The student will be billed for aid he/she was not eligible to receive.
  - A hold will be placed on student account, until all funds owed to Gavilan College are paid in full.
  - A national hold will be reported to the U.S. Dept. of Education, which will prevent student from collecting future grants, work study and student loans at any U.S. college, university, until I repay all aid to Gavilan College.

_____ _____
Student's Signature Date

_____ _____
Parent's Signature Date